



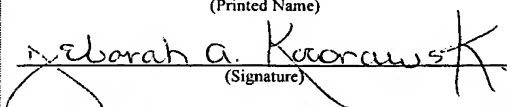
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Atty. Dkt. No. 026032-4964

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: Anderson et al.
Title: ATTACHMENT SYSTEM FOR
MODULES IN A VEHICLE
Appl. No.: 10/552,980
International 05/05/2004
Filing Date:
371(c) Date: 10/12/2005
Examiner: Pedder, Dennis H.
Art Unit: 3612
Confirmation No.: 2125

| | |
|--|------------------------------------|
| CERTIFICATE OF EXPRESS MAILING | |
| I hereby certify that this correspondence is being deposited with the United States Postal Service's "Express Mail Post Office To Addressee" service under 37 C.F.R. § 1.10 on the date indicated below and is addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. | |
| EV 962267578 US (Express Mail Label Number) | March 5, 2007 (Date of Deposit) |
| Deborah A. Kocorowski (Printed Name) | |
|  (Signature) | |

Mail Stop **AMENDMENT**
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

**RESPONSE TO RESTRICTION REQUIREMENT AND
REPLY AND AMENDMENT TRANSMITTAL**

Transmitted herewith is a Response to Restriction Requirement and Reply and Amendment in the above-identified patent application.

- ☒ [X] Response to Restriction Requirement and Reply and Amendment (6 pages).
- ☒ [X] Information Disclosure Statement Under 37 C.F.R. § 1.56 (2 pages).
- ☒ [X] Form PTO/SB/08 (1 page) listing one (1) reference.
- ☒ [X] The fee required for additional claims is calculated below:

| | Claims As Amended | | Previously Paid For | | Extra Claims Present | | Rate | | Additional Claims Fee |
|--|-------------------------|---|------------------------|---|----------------------------|---|----------|---|--------------------------|
| Total Claims: | 22 | - | 20 | = | 2 | x | \$50.00 | = | \$100.00 |
| Independent Claims: | 3 | - | 3 | = | 0 | x | \$200.00 | = | \$0.00 |
| First presentation of any Multiple Dependent Claims: | | + | | | | | \$360.00 | = | \$0.00 |
| CLAIMS FEE TOTAL | | | | | | | | | = \$100.00 |

☐ The Applicants hereby petition for an extension of time under 37 C.F.R. § 1.136(a) for the total number of months checked below:

| | | | |
|---|---|------------|----------|
| <input type="checkbox"/> | Extension for response filed within the first month: | \$120.00 | \$0.00 |
| <input type="checkbox"/> | Extension for response filed within the second month: | \$450.00 | \$0.00 |
| <input type="checkbox"/> | Extension for response filed within the third month: | \$1,020.00 | \$0.00 |
| <input type="checkbox"/> | Extension for response filed within the fourth month: | \$1,590.00 | \$0.00 |
| <input type="checkbox"/> | Extension for response filed within the fifth month: | \$2,160.00 | \$0.00 |
| EXTENSION FEE TOTAL: | | | \$0.00 |
| <input type="checkbox"/> | Statutory Disclaimer Fee under 37 C.F.R. § 1.20(d): | \$130.00 | \$0.00 |
| CLAIMS, EXTENSION AND DISCLAIMER FEE TOTAL: | | | \$100.00 |
| <input type="checkbox"/> | Small Entity Fees Apply (subtract ½ of above): | | \$0.00 |
| Extension Fees Previously Paid: | | | \$0.00 |
| TOTAL FEE: | | | \$100.00 |

A credit card payment form in the amount of \$100.00 is enclosed.

The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 06-1447. Should no proper payment be enclosed herewith, as by the credit card payment form being unsigned, providing incorrect information resulting in a rejected credit card transaction, or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 06-1447.

If any extensions of time are needed for timely acceptance of papers submitted herewith, the Applicants hereby petition for such extension under 37 C.F.R. § 1.136 and authorize payment of any such extensions fees to Deposit Account No. 06-1447.

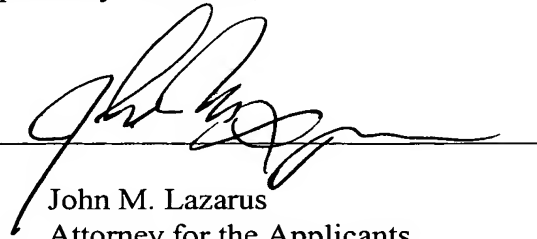
Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date 3/5/2007

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By



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